



# Otters Childcare

## Registration Form - Seaton/Sidmouth

All children who attend one of our clubs must be registered with us. We will ensure that all children reach the Twilight Club safely. Children will remain at the club until collected by a named adult.

Child's name in full		
Preferred name		
Home address		
Date of Birth	Age	School Year Group
School attended		
Name of siblings attending the club	1.	2.
Name of Parents or Carers	1.	2.
Place of Work Address		
Telephone numbers	Home; Work; Mobile:	Home; Work; Mobile:
Names and addresses of other persons authorised to collect child		
Telephone numbers	Home; Work; Mobile:	Home; Work; Mobile:

Office use:

Copied

Entered

Emergency contact	Name	Address
	Home;	
	Work:	
Telephone numbers	Mobile:	
Child's Doctor		
Address		
Telephone number		
Known medical conditions	1.	2.
Regular medication <i>NB Fill in Medication Consent Form</i>	Medication;	Medication;
	Dosage;	Dosage;
	Time required;	Time required;
	Self/adult administered;	Self/adult administered;
Food Allergies	1.	2.
<b>Staff Use Only;</b>		
<b>Breakfast Club-Regular attendance</b> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/>	<b>Twilight Club-Regular attendance</b> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Time of collection if different from end of session.	<b>Holiday Club</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Twilight Club-Occasional</b> <input type="checkbox"/> <b>Breakfast Club-Occasional</b> <input type="checkbox"/>
Any other information		